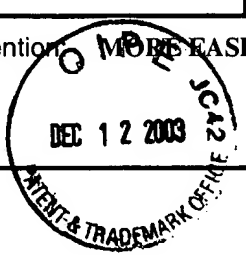

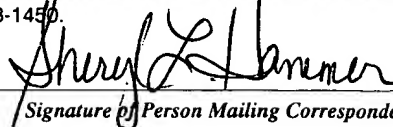


| | | | | | |
|--|-------------------------------------|-----------------------------|--|---------|-------------------|
| AMENDMENT TRANSMITTAL LETTER (Small Entity) | | | Docket No. DEG-10002/29 | | |
| Applicant(s): Gillespie | | | | | |
| Serial No. 09/852,519 | Filing Date May 10, 2001 | Examiner Sharareh | Group Art Unit 1617 | | |
| Invention: MORE EASILY VISUALIZED PUNCTUM PLUG CONFIGURATIONS | | | <div style="font-size: 2em; font-weight: bold;">RECEIVED</div> <div style="text-align: center;">DEC 16 2003</div> | | |
|  | | | <div style="font-size: 1.2em; font-weight: bold;">TECH CENTER 1600/2900</div> | | |
| <u>TO THE COMMISSIONER FOR PATENTS:</u> | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| <input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. | | | | | |
| <input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 8 - | 21 = | 0 x | \$9.00 | \$0.00 |
| INDEP. CLAIMS | 2 - | 3 = | 0 x | \$43.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <input checked="" type="checkbox"/> No additional fee is required for amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ | | | | | |
| <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-1180 | | | | | |
| <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. | | | | | |
| <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. | | | | | |
|  _____ <i>Signature</i> | | | Dated: December 10, 2003 | | |
| John G. Posa Reg. No. 37424 Gifford, Krass, Groh et al 280 N. Old Woodward Ave., Suite 400 Birmingham, MI 48009 Tel. 734/913-9300 | | | I certify that this document and fee is being deposited on <u>12-10-03</u> with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  <i>Signature of Person Mailing Correspondence</i> Sheryl L. Hammer Typed or Printed Name of Person Mailing Correspondence | | |
| CC: | | | | | |